### LOS ANGELES COUNTY- DEPARTMENT OF MENTAL HEALTH

## **Service Area II Program Administration Adult Quality Improvement Committee January 17, 2019** San Fernando Mental Health Center 10:00 am-12:00 pm

Agenda

Welcome- Introductions & Agency Updates ΑII Review and Adoption of November 2018 Minutes\* ΑII

**Quality Improvement** 

Clinical Quality Improvement Office of the Medical Director

Hospital F/U Intensive Care Division\*

Policy Updates\* Office of Compliance **PRO** Office of Pt's Rights

Cultural Competency Update **Cultural Competency Unit** 

Annual CC Training Plan FY18/19\* Organizational Assessment\*\*/\*

Test Calls/Access Ctr Calls (1 min) CY 2018\* Countywide QID/Access

Ctr

Surveys - Fall 2018 Countywide QID

Fall 2017 Data\*/Open-Ended Comments Rpt\*/\*\*

QI Updates/Announcements Countywide QID/AII

Non-clinical PIP – Peer Work Group/Front Ofc Customer Svc Training

**Quality Assurance** 

Audits ΑII

QA Knowledge Assessment Survey Marc Borkheim, Ph.D.

**Training & Operations** Kimber/All

> **Documentation Trainings\*\*** Annual LE QA Report 2019

QA Policy Updates & Technical Asst Kimber/All

P & P 302.03/401.01\*

Reasons for Recoupment 2018-2019\* DHCS SSR Chart Review informal Fdbk Katie A Subclass Verification Form\*

Psych Testing Codes Update

QA Announcements ΑII

Other

How is this information disseminated in your agency ΑII Future Agenda Items & Adjournment ΑII

Handout\* Sent Via Email\*\*

Next Meeting for SA 2 Adult QIC: March 21, 2019 at 10-12 pm

# COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH Service Area 2 Adult QUALITY IMPROVEMENT COUNCIL (QIC) Minutes

Type of Meeting	Service Area 2 Adult Quality Improvement Committee	Date:	January	y 17, 2019	
Place	10605 Balboa Ave 2 <sup>nd</sup> fl Conference Room	Start Time:	10:00 a	.m.	
Chair	Kimber Salvaggio	End Time:	12:00 p	.m.	
Co-Chair	None				
Members Present	APCTC - Tiger Doan Child & Family Ctr - Lorena Chavez Didi Hirsch - Samuel Pina DMH PSB Cert - David Lee DMH PSB Countywide QA - Patricia Lopez DMH PSB Countywide QID - LyNetta Shonibare DMH SB 82 - Ramona Casupang DMH SCVMHC - Sabrina Barscheski DMH SFMHC - Diana Garcia DMH Urgent Care - Amy Kress DMH WVMHC - Denisa Suciu ECDA - Angie Sanchez EI Dorado - Antoinette Cortez Hillview MHC - Julie Jones SFVCMHC, Inc Angela Khan SFVCMHC, Inc Leslie Di Mascio Tarzana Tx Ctr - Karry Friedman Tarzana Tx Ctr - Sherry Winston Topanga West Guest Home/ ACT Wellness Ctr - Megan McDonald				
Absent Members	DMH PRO - DMH PSB Cultural Competency Unit — IMCES –James Pelk JFS - Dora Escalante Pacific Clinics – Danielle Norman Rancho San Antonio – Harmony Vezina PACS-LA -				
Agenda Item & Presenter	Discussion and Find	dings		Decisions commendations actions Tasks	Person Responsible
Call to Order & Introductions	The meeting was called to or a.m.	der at 10:0	) Intro	oductions were le	K. Salvaggio
Review of Minutes	Review and Adoption of Nov	2018 Minu	es		All
Agenda Item & Presenter	Discussion & Find	ings	Red	Decisions commendations	Person Responsible

r age 2		Actions Tasks	
CLINICAL QUALITY IMPROVEMENT	QUALITY IMPROVEMENT  Hospital DC F/U intensive care Division*  Clinical complaints outcomes	QUALITY IMPROVEMENT	Provided by OMD – reported by Kimber
Compliance, Privacy & Audit SVCS Bureau	Policy Updates-See Dec 2018 & Jan 2019 handouts		Provided by Compliance Unit-Reported by Kimber
Pt's Rights	No Report		
Cultural Competency	CC Training Plan FY 18-19*  Tracking of Annual CC Training SA Reports  Memo for DO, LE, Admin Programs  Cc plan calendar year – everyone that is in contact with MHS  NACT is quarterly  Attestation for CW centralized programs or programs like navigation  Org Assmt to be Completed  75 questions  Capture staff perceptions  Gaps of knowledge  Data collection to close within 2 weeks  1300 responses currently  Included open ended questions  Topics/skills found helpful by staff  Update from CCC from previous year  Would decide on a topic and then collaborate with the unit or bureau  PRO Grievance and Appeal form is a good example of their input/work		Provided by CC Unit- Reported by Kimber
Announcements	<ul> <li>forms rec'd – 15000</li> <li>last year 14,700</li> <li>SA4 20% more surveys</li> <li>adult highest 55% returned</li> </ul>		LyNetta Shonibare – Countywide QID/All

	Fall 17 CPS Data &Open-ended		
	Comments Summary Rpt *		
	Non-clinical PIP		
	<ul> <li>Peer work group – standardized</li> </ul>		
	protocols, etc		
	<ul> <li>Front Ofc Customer Satisfaction</li> </ul>		
	Training – 90 min training in		
	March will be filmed – 25 slots for		
	each date		
	QUALITY ASSURANCE	QUALITY	
	QUALITY ACCORDANCE	ASSURANCE	
QA Knowledge	Dr. Borkheim facilitated a discussion and	- 1000111 1110 <u>—</u>	Marc Borkheim
Assessment	received feedback on Countywide QA's		<ul><li>Countywide</li></ul>
Survey	proposed QA Knowledge Assessments.		QA
Presentation*	These QA Quiz's will consist of 10		
	questions about a sample documentation		
	that will be out periodically via survey		
	software. The data collected through		
	these surveys will allow the QA Division to		
	know what are areas that need to		
	emphasized in trainings, as well as allow individual agencies to ensure they are		
	accurately using QA guidelines.		
	decorately define Q, v galdelinee.		
Audits	El Dorado stated they recently had a COA		
	Audit		
Madi Cal	No Donort		
Medi-Cal Certification	No Report		
Certification			
State DHCS*	Group discussion of informal audit		Provided PSB
Updates	feedback*		QA – reported
			by Kimber
Training &	Training & Operations*		Provided by
Operations*	Trainings – see handout*		PSB-QA staff
	Annual LE QA Report 2019 due Jan		reported by
	30		Kimber
	QA Policy and Technical Development*		Provided by
	P & P 302.03 401.01 discussed		PSB-QA staff
	Coor of care and maintenance of		reported by
	records policy done bulletin coming –		Kimber
	and banding		

## QA Policy Updates & Technical Asst.

next day note if it goes beyond 5 days & level 1 & 2

- FY 18/19 Reasons for Recoupment\*
  - CI included dx required? No and no medical nec
  - Client plan ct sig and/or legal rep or reason – no longer a recoup – but if a pattern of bx it will become a recoup - will focus on medical necessity #4 approved ct plan in place before service delivery
  - #6 void and replace process changed – no combined services getting rehab vs tcm vs psychotherapy - if they audited us and they found it we could correct no longer – progress note mismatch with the claim is now a recoupment – under claim no recoup
  - #12 claim for a group activity not properly apportioned – no problem if we under claim
  - #13 service activities group
  - #15 b applicable added defin of MHS
  - No Day Tx or In Pt chgs
  - Psych test code chging jan 1<sup>st</sup> federal cpt codes
  - o Org manual updates coming

#### Access to care

- Is you agency on the list to receive invite – Howard Washington
- HWashington@dmh.lacounty.gov

## Katie A subclass verification form\*

- Added in a yes and no
- Chg fill out for epsdt clients & open child welfare case
- Done at intake and/or open child welfare or out of service

#### Psych testing codes update

- LE's hold claims
- New codes have add ons and most situations must use an add on code
- Our system is not set up to use add on codes
- May not use add on codes at all but if you have Medicare or medi-medi need

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. ago o	to know it doesn't impact negative financially	
Announcements	<ul> <li>Homeless Connect Day</li> <li>Homeless Count 01/22/19 8-11 pm</li> <li>Stats on recent SA2HST were provided to the group</li> </ul>	
Handouts	<ul> <li>Draft of November 2018 Meeting Minutes</li> <li>Handouts from the Mang'd Care Div CCT</li> <li>Dec 2018 &amp; Jan 2019 Policy Updates</li> <li>Annual CC Train'g Plan FY 18-19</li> <li>Hard copy email 01/14/19 Request to Complete Cultural Competence Org Assmt Survey</li> <li>CPS Fall 2017 Provider Level Data</li> <li>CPS Fall 2017 Open Ended Comments Summary Rpt</li> <li>QA Division Doc Train'g Sch'd v. 01/14/19</li> <li>P &amp; P 302.03 &amp; 401.01</li> <li>DHCS Reasons for Recoupment FY 2018-2019</li> </ul>	
<b>Next Meeting</b>	> March 21, 2019	

Respectfully Submitted,

Kimber Salvaggio